FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

2010 OCT 20 AM 9: 13 USPS 10/18

COMMITTEE NAME (Must be same as on Statement of Org	ganization)	Ì		
COFFMAN FOR TREASURER	•		FORM	700
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Candidate (6)City Candidate (8)County PAC (9)City PAC (10)School (11) Local Ballot Issue	, <u>E</u>	DR-2 Rev. 12/2009) or Office Use On	DISCLOSURE REPORT	
CANDIDATE COMMITTEES ONLY:				*
Candidate Name JERRY L COFFMAN	Political Party (if applicable)			
JERRI E COFFINAN	REPUBLICAN	c	omputer	
Office Sought MUSCATINE COUNTY TREASURER				
Late reports are subject to possible civil and criminal penalties. Pucandidate's committee, and the chairperson, for any other type of SIGNATURE OF PERSON FILING REPORT	ursuant to lowa Code sections 68B.32A(7 committee, is the individual responsible for the committee of the co	or filing ti	A.401(3), the car imely and accura	te reports.
TOTAL OF TEROOF ISENS REPORT	TELEPHONE		DATESI	GNED
I AM FILING A 10/19/2010	REPORT FOR (1) ELECTION /	(2)NON-I	ELECTION YEA	۸R.
(report date)	Indicate by #			••••
☐CHECK IF AMENDMENT TO REPORT DATED		ocal Com	mittees, enter Dat	e of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed	1/2/201 ounty & L hich Elect			
STATEMENT OF CASH ON HAN	D			
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fi	cash on hand at the end	\$	0.00	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sched	lule A) (*also see in-kind below)		1,735.00	
Schedule F: Loans Received total (Attach Schedule	F)	•••••	3,188.32	
Schedule H: Total Sales of Campaign Property (Atta	ach Schedule H)	·····		
(Schedule H applies to Candidates' Com	mittees Only)			
	SUB-TOTAL	\$	4,923.32	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)		4,638.60	
Schedule F: Loan Repayments total (Attach Schedu	lle F)			
CASH ON HAND at the end of this reporting period (if final rep	port balance must be zero)	\$	284.72	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule				
**OUTSTANDING LOANS (From Schedule F - Attach Schedu				
CONSULTANT BREAKDOWN (Schedule G Attached?)		•	YESN	10
CANDIDATE COMMITTEES ONLY:		· · · · · · · · · · · · · · · · · · ·		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Atta	ch Schedule H)	\$		

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) COFFMAN FOR TREASURER		CK THIS BOX IF NDING FORM
STATE CAMPIDATES NOT	<u> </u>	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOF FUND- RAISER
8/25/10	ID#	GARY L CARLSON 104 DEERPATH LANE MUSCATINE, IA 52761		\$50.00	INCOME
8/25/10	ID# CK#	J.H. KENT 2507 MULBERRY AVE MUSCATINE, IA 52761		100.00	
8/25/10	ID#	ROBERT H BAHN 2805 TERMINI DR MUSCATINE, IA 52761		50.00	
8/25/10	ID# CK#	DENNIS M TAYLOR 3204 MULBERRY AVE MUSCATINE, IA 52761		50.00	
8/25/10	ID# CK# ✓	MICHAEL J GAETA 5520 REYNOLDS AVE MUSCATINE, IA 52761		25.00	
8/25/10	ID# CK# ✓	DYAN E ROBY 2208 OAK VALLEY DR MUSCATINE, IA 52761		25.00	
8/25/10	ID# CK# (J.W. MARK 105 E 7TH ST MUSCATINE, IA 52761		50.00	
8/25/10	ID# CK# /	ALBERT R CHURCH 1002 SUNRISE CIR MUSCATINE, IA 52761		25.00	
	ID# CK# √	MARK LOFGREN 2310 FOREST PKWY MUSCATINE, IA 52761		50.00	
2/25/10	ID# CK#	ROBERT LANDE 412 WOODCREST LN MUSCATINE, IA 52761		50.00	
		TOTAL (if last page	SUB-TOTAL e of this schedule)	\$ 475.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

SCHEDULE

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) COFFMAN FOR TREASURER		CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE: 15 A CONTENTS	<u> </u>	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
8/25/10	ID# CK#	JOHN WITTE 913 W 3RD ST MUSCATINE, IA 52761		\$ 10.00	INCOME
8/27/10	ID# CK# ✓	ROBERT TOBORG 3450 MULBERRY AVE APT 9 MUSCATINE, IA 52761		50.00	
8/27/10	ID#	JEFFREY A KAUFMANN 2125 OLD MUSCATINE RD WILTON, IA 52778		50.00	
8/27/10	ID#	FRANCIS F DRESS 29425 TROON ST		100.00	
8/27/10	ID# CK# ✓	JAMES F HAHN 900 WEST 4TH ST MUSCATINE, IA 52761		50.00	
8/27/10	ID# CK#	AVERY ZYBARTH 2244 BENTWOOD DR MUSCATINE, IA 52761		50.00	
8/25/2010	ID# CK# /	JOHN A WOJTECKI 1906 MULBERRY AVE MUSCATINE, IA 52761		50.00	
9/1/2010	ID# CK#	WILLIAM PARKS 1749 ARBOR OAKS DR MUSCATINE, IA 52761		50.00	
9/1/2010	ID# CK# ✓	MR & MRS MARLIN SCHAULAND 523 SUNRISE CIR MUSCATINE, IA 52761		25.00	
9/1/2010	ID# CK# ✓	MARK D HANSEN 1887 NORTH ISETT AVE MUSCATINE, IA 52761		25.00	
				\$ 460.00	

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of (for Schedule A)

SCHEDULE

MONETARY

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Coffman for Treasurer	CHE	CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS SECURITY		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER ID#	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND- RAISEF
9/8/10	CK#	D.W. Longtin 45 Geneva Dr. Muscatine, IA 52761		\$10.00	INCOM
9/8/10	ID# CK#	Tim D Nelson 1828 Hwy 38 Muscatine, IA 52761		50.00	
9/8/10	ID# CK#	Roger L Lande 515 W 2nd St Muscatine, IA 52761		100.00	
9/8/10	ID# CK#	Thomas R Sands 13247 130th St.		100.00	
9/13/10	ID# CK#	Wapello, IA 52653 R.F. Weis 2315 Stonebrook Dr.		25.00	
9/13/10	ID# CK#	Muscatine, IA 52761 Gregory J Kistler 2462 Prairie Rose Ridge Muscatine, IA 52761		100.00	
9/13/10	ID# CK#	Diana Gradert 707 Maple Ct PO Box 633 Wilton, IA 52778		100.00	
//13/10	ID# CK#	Walter J Conlon W 2nd St Muscatine, IA 52761		25.00	
	ID# CK#	Dorothy Cockshoot 3450 Mulberry Ave Apt 14 Muscatine, IA 52761		50.00	
/20/10	CK#	Donald Ager 3099 Hwy 22 Muscatine, IA 52761		25.00	
		TOTAL (if last page	SUB-TOTAL \$ of this schedule)	585.00	

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3 _ of ⁴ (for Schedule A)

SCHEDULE

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Coffman for Treasurer		CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE: IF A CONTRIBUTION	L	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND- RAISEF
	ID#				INCOM
9/20/2010	СК#	Leslie Soule 2638 Canterbury Rd Muscatine, IA 52761		\$20.00	
	ID#	iviuscatine, IA 32/61			
9/20/10	ĆK#	Wayne Schaapveld 2107 Seven Springs Rd		20.00	
	ID#	Muscatine, IA			
9/24/10	CK#	Jay Steen 1773 115th St West Liberty LA 52776		50.00	
	ID#	West Liberty, IA 52776			
9/24/10	CK#	Dennis Eckhardt 2689 Summer Sunset Ln		25.00	
	ID#	Muscatine, IA 52761	·		
9/28/10	CK#	Karen Schaub 700 W 2nd St. Muscatine, IA 52761		25.00	
	ID#	Wuscatine, IA 52/61			
10/1/10	CK#	Jeff Kaufmann 2125 Old Muscatine Rd Wilton, IA 52778		50.00	
	ID#	Witten, 11 32778			
10/8/10	CK#	Mark Mather 2682 Tom Sawyer Rd Muscatine, IA 52761		25.00	
	ID#	Museume, IA 32701			
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			CUD TOTAL		
			SUB-TOTAL	215.00	
		TOTAL (if last page of	of this schedule)	1735.00	

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(for Schedule A)

\$ 1735.00

SCHEDULE



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) COFFMAN FOR TREASURER

			TOTAL (#floates and	\$ 4588.60
			SUB-TOTAL	\$ 4588.60
0/11/10	ck# 2	Sycamore Printing 216 Sycamore St Muscatine, IA 52761	Donation letters & cards	698.02
/29/10	CK# ₁₁₃₂₂	Sycamore Printing 216 Sycamore St Muscatine, IA 52761	Donation letters & cards	791.43
	CK#1002	Muscatine Journal 301 E 3rd St Muscatine, IA 52761	Political ad	490.25
/20/10	1001	Sycamore Printing 216 Sycamore St Muscatine, IA 52761	Yard Signs	960.03
0/01/10		Sycamore Printing 216 Sycamore St Muscatine, IA 52761	Magnetic signs, handouts & donation letters.	1275.02
3/27/10	ID# CK# 11307	Muscatine Journal 301 E 3rd St Muscatine, IA 52761	Political ads 9/1-9/29	323.40
8/9/10	CK#	Muscatine County Auditor 414 E 3rd St Muscatine, IA 52761	Voter List	13.00
7/23/10	ID#	Country Oaks Photography 1075 Garfield Ave West Liberty, IA 52776	political photo	\$ 37.45
DATE EXPENDED (MM/DD/YR)	CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

	SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CHEC AME	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Org	anization)
COFFMAN FOR TREASURER	anizauon)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/28/10	NUMBER ID# CK#	Muscatine County Auditor 414 E 3rd St Muscatine, IA 52761	Voter List	\$ 50.00
	ID# CK#			3
	ID#			
	CK#			
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1	D#			
	D#			
	CK#			
	D# :K#		·	
			SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$ 4638.60

THIS DOY ADDITION		
THIS BOX APPLIES	TO CANDIDATES' COMMITTEES ONLY	-
	THE THE PROPERTY OF THE PROPER	∕•

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of _		_

FOR INSTRUCTIONS, SEE BACK OF FORM		
	SCHEDULE F (Rev. 02/08)	LOANS RECEIVED
NOTE: This schedule reports money loaned to the committee which is deposited in the committee account. TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ -0-	CHECK T	& REPAID HIS BOX IF
PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD (Original source of loan, such as a bank, must be shown if a third party is invest.)		

MONETARY LOANS RECEIVED THIS REPORTING PERIOD (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE	A. C.	i w i w danada	ne's personal funds.)
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAM
9/1/10	Jerry L Coffman P O Box 1251 Muscatine, IA 52761	Candidate	^{\$} 1648.87
9/29/10	Jerry L Coffman P O Box 1251 Muscatine, IA 52761	Candidate	841.43
10/11/10 Jerry L Coffman P O Box 1251 Muscatine, IA 52761	Candidate	698.02	
RT II - MONET/	ARY LOAN BEDAGGER	TOTAL (PART I) \$	3188.32

PART II - MONETARY LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER	DEL DE COMP	
((Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$
1			
1			
_			

TOTAL CASH REP	PAYMENTS (PART II)	\$
From Schedule E TOTAL L		\$
*Disclosure law requires candidate committees to disclose the relationship of any relative consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contribute relationship column when it applies.		\$of 1
		(for Schedule F)